

POSITION	INITIALS	ID NO.	DATE
FEES DETERMINATION			10/31/00
O.I.P.E. CLASSIFIER		40	11/15/00
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW		71471	12/12

BEST AVAILABLE COPY

## INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 - (Through numeral) ... Canceled  
 -+ ..... Restricted

N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

Claim	Date
1	
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3	
4	
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6	
7	
8	
9	
10	0
11	
12	
13	
14	
15	
16	0
17	✓
18	0
19	
20	
21	
22	✓
23	
24	0
25	
26	
27	
28	
29	
30	
31	✓
32	✓
33	✓
34	0
35	✓
36	✓
37	0
38	✓
39	0
40	
41	
42	
43	
44	✓
45	✓
46	0
47	
48	
49	
50	✓

Claim	Date
51	
52	
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56	0
57	✓
58	0
59	✓
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62	0
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68	0
69	✓
70	0
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73	✓
74	✓
75	✓
76	0
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84	0
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Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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